

OLGA DAZZO

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To: Michigan Obstetricians and Gynecologists

Pertussis (whooping cough) can be a life-threatening infection in infants. To protect them, the Michigan Department of Community Health (MDCH) urges you to make sure parents, siblings, grandparents, and health care personnel within your facility have received the Tdap vaccine. Having Tdap vaccine available and breaking down barriers to giving this vaccine in ob-gyn settings will help us make significant in roads to fighting this disease in our communities.

Ob-gyns are an important source of information and advice on immunizations for pregnant women and play a crucial role in a pregnant woman's decision to get vaccinated - protecting her health and the health of her unborn baby. Since women are encouraged to visit their ob-gyn on an annual basis, many women of childbearing age rely on ob-gyns for primary care. Therefore, as an ob-gyn, you play a critical part in educating women about the importance of immunizations and providing preventative care services, such as flu and pertussis vaccines.

Michigan has seen a significant rise in pertussis cases in recent years. This increase was first observed in Michigan during the second half of 2008 and continued throughout 2009 (902 cases) and 2010 (1,519 cases, provisionally). Prior to this increase, there were 315 cases reported in 2008 and around 340 cases per year from 2003-2007.

Secondary attack rates for pertussis are around 70-80% among susceptible household contacts. Pertussis may be milder in older persons; however, those who are infected may transmit the disease to other vulnerable persons, including unimmunized or incompletely immunized infants. Older persons are often found to have the first case in a household with multiple pertussis cases, and are often the source of infections for children.

Despite sustained high coverage for childhood pertussis vaccination, pertussis remains poorly controlled in the United States. Although ACIP recommendations for adolescents and adults to receive Tdap vaccine have been in place since 2005, Tdap coverage is 56% among adolescents and <6% among adults. A total of 16,858 pertussis cases and 12 infant deaths were reported in 2009 (CDC, unpublished data, 2009).

To remove identified barriers and programmatic gaps that contribute to suboptimal vaccination coverage, the ACIP recommended the expanded use of Tdap vaccine in October, 2010. Updated recommendations for use of Tdap vaccine from the Advisory Committee on Immunization Practices are available at www.cdc.gov/vaccines.

Women should ideally receive Tdap vaccine before becoming pregnant. Pregnant women who were not vaccinated previously with Tdap should receive Tdap in the immediate postpartum period before discharge from the hospital or birthing center. Although pregnancy is not a contraindication for receiving Tdap vaccine, health care providers should weigh the risks and benefits before choosing to administer Tdap vaccine to a pregnant woman including the possibility of increased risk of contracting pertussis during a community outbreak. Tdap can now be administered regardless of the interval since the last Td vaccine was given.

Remember, Tdap vaccine is not just for mothers – it's for all family members and caregivers of the infant, including fathers, grandparents, siblings, babysitters, and health care personnel. Protect vulnerable infants by vaccinating the women in your care, and ensure your office has a policy for vaccinating health care personnel against serious diseases, such as pertussis. Thank you for joining in the fight to protect Michigan's infants.

Sincerely.

Greg Holzman, MD, MPH Chief Medical Executive

Nothing MO, MIH